

At the same time, society would be protected from having to bear the costs of his recklessness.

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# REFERENCE

1. Luna GK, Copass MK, Oreskovich MR, et al: The role of helmets in reducing head injuries from motorcycle accidents: A political or medical issue? West J Med 135:89-92, Aug 1981

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TO THE EDITOR: I am writing in response to the article, in the August issue of the journal, entitled "The Role of Helmets in Reducing Head Injuries From Motorcycle Accidents: A Political or Medical Issue?"

This syllogism would make Karl Marx proud: Fifty-nine percent of the unpaid medical bills are borne by taxpayers.

Motorcycle helmets reduce head injuries.

Therefore, since society is financially responsible for an individual's health, prerogatives should be replaced by a law mandating helmets.

Who says doctors are against Socialized Medicine?

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## Motorists, Seat Belts and Individual Freedom

TO THE EDITOR: Luna and co-workers contribute proof that the use of helmets by motorcyclists is medically advantageous.<sup>1</sup> The accompanying editorial by Dr. Trunkey<sup>2</sup> adds pertinent societal and economic arguments for requiring all motorcyclists to wear helmets. However, the probable benefit from universal helmet usage by motorcyclists pales to virtual insignificance when compared with the savings in lives, suffering and dollars that could be achieved if seat belts (with shoulder harnesses) were universally worn by motorists. The loss of "individual freedom" to a motorist who is required to wear a seat belt is, if anything, less than a cyclist's loss from a mandatory helmet, and the advantage (collectively) to society is greater. Thus, it seems inappropriate to require motorcyclists to practice self-protection unless we are willing to require automobile drivers and passengers to do likewise.

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# REFERENCES

1. Luna GK, Copass MK, Oreskovich MR, et al: The role of helmets in reducing head injuries from motorcycle accidents: A political or medical issue? West J Med 135:89-92, Aug 1981
2. Trunkey DD: Helmets for motorcyclists (Editorial). West J Med 135:136, Aug 1981

## The Face of Medicine

*Medicine has a changing and unchanging face, and it is as necessary to learn the meaning of the first as it is to recognize and cherish the second.*

Sir F. M. R. Walshe<sup>1</sup>

One wonders if the young doctor of today, as he emerges from the protective womb of his residency training, gives a moment's thought to what tremendous changes have come about in the medical world he is now entering?

Does he realize that medical practice now is at once more difficult, yet simpler, thanks to third parties and technology; that his colleague of a generation or two ago dealt more with the art of medicine but less with the bureaucracy?

That the good old family doctor enjoyed the intimacy of the house call when sometimes his best and only medicine was a cool hand on a fevered brow, yet that he was denied the comfort of the weekend and nighttime coverage in the ER, as we have it now?

Surely this young doctor would be appalled by the ulcer treatment of yesteryear—those horrible Sippy powders and sickening half-and-half, round the clock, on the hour. Now the ulcer, by fiberoptics seen, quickly gets a prescription for an antacid and cimetidine.

And the GI surgeons of today may never know the joy (or the tedium) of the three layer anastomotic closure—so meticulous, as he pops in an instant row of staples—so simple, yet miraculous.

The dermatologist of not too long ago had only coal tar, sulfur, aquaphor and salicylate. Now he just decides whether therapy shall be methotrexate, hydrocortisone or fluorinate.

The heart doctor of that bygone era used a stethoscope to listen and his fingers for percussion; now he depends on ultrasound, telemetry, echocardiography, in making his decision. For HBP and CHF old timer had phenobarb, dig, salts of mercury—little more; today we are blessed with dozens of diuretics, methyldopa and beta blockers galore.